Pumpkin Test report

Patient:	Pumpkin	Species:	Canine	Patient ID:	2505211
Client:	Adoree Jabanes	Gender:	Female	Age:	Adult

AI Aided Diag. Explan.

It is recommended to add symmetric dimethylarginine (SDMA), urinary protein to creatinine ratio (UPC), urinary specific gravity (SG), and imaging examinations to identify the cause and grading of renal dysfunction, based on clinical manifestations and medical history.

Immunoassay test report

Patient:	Pumpkin	Species:	Canine	Patient ID:	2505211
Client:	Adoree Jabanes	Gender:	Female	Sample No.:	0000001
Doctor:		Age:	Adult	Time of analysis:	2025/05/21 20:23

Lab item	Current result		Ref. Ranges	
cSDMA	**11.0**	µg/dL	0.0-14.0	

Operator:

Report Explan.

cSDMA

Result indications:
<14.0 ug/dL Normal
14.0-20.0 ug/dL Suspected
>20.0 ug/dL Abnormal
Clinical significance:
cSDMA is an early biomarker of progressive kidney injury, and an increase may indicate impaired renal function.

Note: Due to the complexity and individuality of disease diagnosis, the report interpretation is only for your reference. Please consult your doctors for clinical diagnosis results.

The results only applies to this test sample. Test Instrument:Mindray vetXpert I3 Time of Printing:2025-06-02 15:41:09

Biochemistry test report

Patient:	Pumpkin	Species:	Canine	Patient ID:	2505211
Client:	Adoree Jabanes	Gender:	Female	Sample No.:	0000001
Doctor:		Age:	Adult	Time of analysis:	2025/05/21 20:21

	Item		Current result		Ref. Ranges	
Protein	**TP**	↑	**9.23**	g/dL	5.31-7.92	
Protein	**ALB**		**3.16**	g/dL	2.34-4.00	
Protein	**GLOB**	↑	**6.07**	g/dL	2.54-4.40	
Protein	**A/G**		**0.5**			
Liver and gallbladder	**ALT**	↑	**427.7**	U/L	10.1-100.3	
Liver and gallbladder	**AST**	↑	**59.6**	U/L	21.0-51.7	
Liver and gallbladder	**AST/ALT**		**0.14**			
Liver and gallbladder	**ALP**	↑	**273.6**	U/L	15.5-125.0	
Liver and gallbladder	**GGT**	↑	**18.6**	U/L	0.0-15.9	
Liver and gallbladder	**TBIL**		**<0.10**	mg/dL	0.00-0.88	
Liver and gallbladder	**TBA**	↑	**13.0**	μmol/L	0.0-10.0	
Pancreas	**AMY**	↑	**2523.7**	U/L	397.7-1285.1	
Kidneys	**BUN**	↑	**54.29**	mg/dL	7.02-27.45	
Kidneys	**CREA**	↑	**1.97**	mg/dL	0.38-1.40	
Kidneys	**BUN/CREA**		**27.4**			
Cardiovasc./Muscle	**CK**		**136.6**	U/L	66.4-257.5	
Cardiovasc./Muscle	**LDH**		**86.7**	U/L	36.4-143.6	
Energy metabolism	**GLU**	↑	**187.8**	mg/dL	68.5-113.3	
Energy metabolism	**TC**		**310.3**	mg/dL	103.2-324.1	
Energy metabolism	**TG**	↑	**408.9**	mg/dL	8.9-115.1	
Minerals	**Ca**		**10.45**	mg/dL	9.20-11.88	
Minerals	**PHOS**		**3.48**	mg/dL	3.10-6.81	
Minerals	**CaxP**		**2.94**	mmol/L^2		
Minerals	**Mg**	↓	**1.44**	mg/dL	1.73-2.58	
Electrolytes	**Na+**		**150.1**	mmol/L	141.6-160.0	
Electrolytes	**K+**		**4.0**	mmol/L	3.5-5.9	
Electrolytes	**Na/K**		**37.1**			
Electrolytes	**Cl-**	↑	**127.6**	mmol/L	102.7-125.0	

Operator:

Comprehensive Diagnosis Panel **QC QC OK**

HEM(Hemolysis degree): 0 LIP(Lipemia degree): 1+ ICT(Jaundice degree): 0

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Biochemistry test report

Patient:	Pumpkin	Species:	Canine	Patient ID:	2505211
Client:	Adoree Jabanes	Gender:	Female	Sample No.:	0000001
Doctor:		Age:	Adult	Time of analysis:	2025/05/21 20:21

Report Explan.

TP	↑	Increase is commonly associated with dehydration and increased globulin. Reduction is commonly associated with blood loss, protein-losing enteropathy, and decreased albumin.
GLOB	↑	Increase is commonly associated with chronic inflammation and infection, and hyperimmunity, etc. Reduction is commonly associated with insufficient protein intake, anemia, and immunodeficiency.
ALT	↑	Increase is commonly associated with liver injury and muscle injury, etc.
AST	↑	Increase is commonly associated with liver injury and muscle injury, etc.
ALP	↑	Increase is commonly associated with fracture healing period, hepatobiliary diseases, hyperthyroidism, and osteosarcoma, etc.
GGT	↑	Elevated is commonly associated with bile duct injury or cholestasis, etc.
TBA	↑	Increase is commonly associated with hepatic insufficiency or failure, portal vein shunt, and cholestasis, etc. Reduction is commonly associated with long-term fasting and intestinal malabsorption, etc.
AMY	↑	Increase is commonly associated with gastroenteritis, pancreatitis, pancreatic tumor, etc.
BUN	↑	Increase is commonly associated with high protein diet, gastrointestinal bleeding, nephropathy, and urinary obstruction, etc. Reduction is commonly associated with insufficient protein intake and liver failure, etc.
CREA	↑	Increase is commonly associated with nephropathy, etc. Reduction is commonly associated with malnutrition and muscular atrophy, etc.
GLU	↑	Increase is commonly associated with diabetes and hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.
TG	↑	Increase is commonly associated with postprandial, obesity, diabetes and hypercorticalismus, etc.
Mg	↓	Increase is commonly associated with nephropathy, hypoadrenocorticism, hypocalcemia, and muscle injury, etc. Reduction is commonly associated with gastrointestinal malabsorption, nephropathy, and hyperthyroidism, etc.
Cl-	↑	Increase is commonly associated with salt intoxication, hypertonic NaCl solution rehydration, small intestinal diarrhea, etc. Reduction is commonly associated with vomiting, diuretic therapy, etc.

Note: Due to the complexity and individuality of disease diagnosis, the report interpretation is only for your reference. Please consult your doctors for clinical diagnosis results.

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